

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

DEMOCRATIC PARTY OF ILLINOIS

ADDRESS (number and street)

P.O. BOX 518

☐ Check if different than previously reported. (ACC)

SPRINGFIELD

IL

62705

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00167015

3. IS THIS REPORT

☐

NEW (N)

OR

☒

AMENDED (A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☒ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Michael Kasper

Signature of Treasurer

Michael Kasper

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

DEMOCRATIC PARTY OF ILLINOIS

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y Y
03		01		2015

To:

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date																		
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="6">2015</td></tr></table>	Y	Y	Y	Y	Y	Y	2015							<table><tr><td colspan="6">1719554.27</td></tr></table>	1719554.27					
Y	Y	Y	Y	Y	Y															
2015																				
1719554.27																				
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="6">1653977.87</td></tr></table>	1653977.87																		
1653977.87																				
(c) Total Receipts (from Line 19) .....	<table><tr><td colspan="6">97722.43</td></tr></table>	97722.43						<table><tr><td colspan="6">222682.43</td></tr></table>	222682.43											
97722.43																				
222682.43																				
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="6">1751700.30</td></tr></table>	1751700.30						<table><tr><td colspan="6">1942236.70</td></tr></table>	1942236.70											
1751700.30																				
1942236.70																				
<hr/>																				
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="6">38880.33</td></tr></table>	38880.33						<table><tr><td colspan="6">229416.73</td></tr></table>	229416.73											
38880.33																				
229416.73																				
<hr/>																				
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table><tr><td colspan="6">1712819.97</td></tr></table>	1712819.97						<table><tr><td colspan="6">1712819.97</td></tr></table>	1712819.97											
1712819.97																				
1712819.97																				
<hr/>																				
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="6">0.00</td></tr></table>	0.00																		
0.00																				
<hr/>																				
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="6">0.00</td></tr></table>	0.00																		
0.00																				



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**DEMOCRATIC PARTY OF ILLINOIS**

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	01	/	2015

To:

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

3500.00

3500.00

(ii) Unitemized .....

596.53

841.53

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

4096.53

4341.53

(b) Political Party Committees .....

9680.00

9680.00

(c) Other Political Committees

(such as PACs).....

36290.00

47492.55

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

50066.53

61514.08

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

47655.90

95555.90

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

65612.45

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

65612.45

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

97722.43

222682.43

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

97722.43

157069.98

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	11054.83	47339.13
(ii) Non-Federal Share.....	19653.06	84158.60
(b) Other Federal Operating Expenditures .....	0.00	5162.55
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	30707.89	136660.28
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	9.30	9.30
(ii) "Levin" Share.....	34.97	34.97
(b) Federal Election Activity Paid Entirely With Federal Funds .....	8128.17	92712.18
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	8172.44	92756.45
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	38880.33	229416.73
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19192.30	145223.16

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	50066.53	61514.08
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	50066.53	61514.08
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	11054.83	52501.68
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	11054.83	52501.68

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6 OF 43

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)

**A. Thomas Bennett**

Mailing Address 2536 South California

City

Chicago

State

IL

Zip Code

60608

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Thomas R. Bennett, At Law

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2015

**Transaction ID : SA11AI.37853**

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Richard Black**

Mailing Address 320 George Street

City

Morris

State

IL

Zip Code

60450-1171

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2015

**Transaction ID : SA11AI.37855**

Amount of Each Receipt this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

**C. DNC Services Corp**

Mailing Address 430 S. Capitol Street

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

**Transaction ID : SA11AI.37851**

Amount of Each Receipt this Period

14483.46

IL Party Victory Fund Unitemized

**[MEMO ITEM]****SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3500.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.37851

IL Party Victory Fund

Form/Schedule:

Transaction ID:

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 43

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)

**A. Eve S Greer Ms.**Mailing Address 720 Noyes  
Apt C-1

City	State	Zip Code
Evanston	IL	60201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self

Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2015

**Transaction ID : SA11AI.37846**

Amount of Each Receipt this Period

190.00

IL Party Victory Fund

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Dennis Jacobs Senator**

Mailing Address 3511 8th St

City	State	Zip Code
East Moline	IL	61244-3537

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Deeny Jacobs And Ass

Lobbyist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2015

**Transaction ID : SA11AI.37842**

Amount of Each Receipt this Period

285.00

IL Party Victory Fund

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Paul Linder**

Mailing Address 502 12TH Ave

City	State	Zip Code
Mendota	IL	61342-1946

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Sensient Technologie

Laborer / Factory Worker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2015

**Transaction ID : SA11AI.37844**

Amount of Each Receipt this Period

2850.00

IL Party Victory Fund

**[MEMO ITEM]****SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00



: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.37846

IL Party Victory Fund

Form/Schedule: SA11AI

Transaction ID: SA11AI.37842

IL Party Victory Fund

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.37844

IL Party Victory Fund

Form/Schedule:

Transaction ID:

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 43

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)

**A. Charlotte Lindon Ms.**

Mailing Address 2500 Indigo Ln Unit 337

City  
GlenviewState  
ILZip Code  
60026-8306FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	11	/	2015

Transaction ID : SA11AI.37840

Amount of Each Receipt this Period

285.00

IL Party Victory Fund

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. John R. McCambridge**

Mailing Address 1336 Ashland Ave

City  
WilmetteState  
ILZip Code  
60091-1608FEC ID number of contributing  
federal political committee.

C

Name of Employer

Grippe And Elden

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

Transaction ID : SA11AI.37850

Amount of Each Receipt this Period

237.50

IL Party Victory Fund

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Mary McCullough Ms.**

Mailing Address 1515 Barrington Rd Apt 120

City  
Hoffman EstState  
ILZip Code  
60169FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	11	/	2015

Transaction ID : SA11AI.37838

Amount of Each Receipt this Period

641.25

IL Party Victory Fund

**[MEMO ITEM]****SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.37840

IL Party Victory Fund

Form/Schedule: SA11AI

Transaction ID: SA11AI.37850

IL Party Victory Fund

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.37838

IL Party Victory Fund

Form/Schedule:

Transaction ID:

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 43

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)

**A. Mary A Perry-Bates**

Mailing Address 620 Knollwood Rd

City

Ingleside

State

IL

Zip Code

60041-9343

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Warren Township High

Occupation

Public School Superintendent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2015

Transaction ID : SA11AI.37848

Amount of Each Receipt this Period

190.00
--------

IL Party Victory Fund

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Gadi Steiner Dr.**

Mailing Address 2012 O'Donnell Dr.

City

Champaign

State

IL

Zip Code

61821-6465

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Adm

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	07	/	2015

Transaction ID : SA11AI.37837

Amount of Each Receipt this Period

237.50
--------

IL Party Victory Fund

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Harold J Vickery**

Mailing Address 2404 Westline Dr

City

Joliet

State

IL

Zip Code

60431-1245

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NORTH BOONE SCHOOL

Occupation

Teacher

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	26	/	2015

Transaction ID : SA11AI.37835

Amount of Each Receipt this Period

95.00
-------

IL Party Victory Fund

**[MEMO ITEM]****SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
------

3500.00
---------

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.37848

IL Party Victory Fund

Form/Schedule: SA11AI

Transaction ID: SA11AI.37837

IL Party Victory Fund

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.37835

IL Party Victory Fund

Form/Schedule:

Transaction ID:



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 43

(check only one)

<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	---	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

**A. DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

Mailing Address 430 SOUTH CAPITOL STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

FEC ID number of contributing federal political committee.

C C00460147

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4840.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2015

Transaction ID : SA11B.37856

Amount of Each Receipt this Period

4840.00

Contribution

Full Name (Last, First, Middle Initial)

**B. DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

Mailing Address 430 SOUTH CAPITOL STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

FEC ID number of contributing federal political committee.

C C00460147

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9680.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2015

Transaction ID : SA11B.37872

Amount of Each Receipt this Period

4840.00

Contribution

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

9680.00

TOTAL This Period (last page this line number only)..... ►

9680.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 43

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	---	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)

**A. Democratic Congressional Campaign Committee**

Mailing Address 430 South Capitol Street, S.E. #2

City

State

Zip Code

Washington

DC

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

42652.55

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	1	5

**Transaction ID : SA11C.37877**

Amount of Each Receipt this Period

36290.00

Contribution

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

36290.00

36290.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 OF 43

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)

## **A. Bloom Township Democratic Organization**

Mailing Address 219 W. 28th Street

City State Zip Code  
 South Chicago Heights IL 60411

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2015

**Transaction ID : SA17.37866**

Amount of Each Receipt this Period

1000.00

Voter file

Full Name (Last, First, Middle Initial)

## **B. New Village Vision Party**

Mailing Address 4303 Atlantic

City State Zip Code  
 Schiller Park IL 60176

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2015

**Transaction ID : SA17.37863**

Amount of Each Receipt this Period

250.00

Voter file

Full Name (Last, First, Middle Initial)

## **C. Senate Democratic Victory Fund**

Mailing Address 29 South LaSalle  
 Suite 936

City State Zip Code  
 Chicago IL 60603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2015

**Transaction ID : SA17.37861**

Amount of Each Receipt this Period

25000.00

Voter file

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

26250.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 43  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

### A. VLM Cooperative

Mailing Address P.O. Box 9

City Lexington State KY Zip Code 40588

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20905.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 06 / 2015

Transaction ID : SA17.37862

Amount of Each Receipt this Period

20905.90

Voter file

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20905.90

47155.90

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 43

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)

**A. County Market**

Mailing Address 3001 Veterans Parkway

City	State	Zip Code
Springfield	IL	62704

Purpose of Disbursement  
Beverages/food for Vote builder training

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		17		2015

**Transaction ID : SB30B.37796**

Amount of Each Disbursement this Period

61.40
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Dunkin Donuts**

Mailing Address 107 Chatham

City	State	Zip Code
Springfield	IL	62704

Purpose of Disbursement  
DonutsVote builder training

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		17		2015

**Transaction ID : SB30B.37792**

Amount of Each Disbursement this Period

106.15
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Illinois Department of Employment Security**

Mailing Address P.O. Box 19493

City	State	Zip Code
Springfield	IL	62703

Purpose of Disbursement  
Payroll taxes

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2015

**Transaction ID : SB30B.37781**

Amount of Each Disbursement this Period

113.44
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

113.44
--------

--

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 43

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)

**A. Illinois Department of Employment Security**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2015

Mailing Address P.O. Box 19493

City	State	Zip Code
Springfield	IL	62703

**Transaction ID : SB30B.37829**Purpose of Disbursement  
Payroll taxes

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

204.19
--------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**B. Illinois Department of Revenue**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2015

Mailing Address Department of Revenue

City	State	Zip Code
Springfield	IL	62704

**Transaction ID : SB30B.37779**Purpose of Disbursement  
Payroll withholding

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

70.31
-------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**C. Illinois Department of Revenue**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2015

Mailing Address Department of Revenue

City	State	Zip Code
Springfield	IL	62704

**Transaction ID : SB30B.37828**Purpose of Disbursement  
Payroll withholding

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

126.56
--------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

401.06
--------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 43

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)

**A. Internal Revenue Service**

Mailing Address Department of the Treasury

City	State	Zip Code
Kansas City	MO	64999

Purpose of Disbursement  
Payroll withholding

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2015

**Transaction ID : SB30B.37780**

Amount of Each Disbursement this Period

556.41
--------

Full Name (Last, First, Middle Initial)

**B. Internal Revenue Service**

Mailing Address Department of the Treasury

City	State	Zip Code
Kansas City	MO	64999

Purpose of Disbursement  
Payroll withholding

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2015

**Transaction ID : SB30B.37827**

Amount of Each Disbursement this Period

902.72
--------

Full Name (Last, First, Middle Initial)

**C. Jimmy Johns**

Mailing Address 219 S. 6th Street

City	State	Zip Code
Springfield	IL	62704

Purpose of Disbursement  
Lunch for Vote builder training

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2015

**Transaction ID : SB30B.37794**

Amount of Each Disbursement this Period

149.99
--------

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1459.13
---------

--

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 43

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)

**A. Kenneth Kimber**

Mailing Address 2217 Boysenberry Lane

City	State	Zip Code
Springfield	IL	62711

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2015

**Transaction ID : SB30B.37819**

Amount of Each Disbursement this Period

1391.72
---------

Full Name (Last, First, Middle Initial)

**B. Kenneth Kimber**

Mailing Address 2217 Boysenberry Lane

City	State	Zip Code
Springfield	IL	62711

Purpose of Disbursement  
Vote builder training-see breakdown

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		17		2015

**Transaction ID : SB30B.37791**

Amount of Each Disbursement this Period

372.54
--------

Full Name (Last, First, Middle Initial)

**C. Kenneth Kimber**

Mailing Address 2217 Boysenberry Lane

City	State	Zip Code
Springfield	IL	62711

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2015

**Transaction ID : SB30B.37820**

Amount of Each Disbursement this Period

2345.72
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4109.98



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 43

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)

**A. Kenneth Kimber**

Mailing Address 2217 Boysenberry Lane

City	State	Zip Code
Springfield	IL	62711

Purpose of Disbursement  
March insurance

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2015

**Transaction ID : SB30B.37822**

Amount of Each Disbursement this Period

312.81
--------

Full Name (Last, First, Middle Initial)

**B. MailChip**

Mailing Address 512 Means Street

City	State	Zip Code
Atlanta	GA	30318

Purpose of Disbursement  
Email size update to send unlimited emails

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2015

**Transaction ID : SB30B.37797**

Amount of Each Disbursement this Period

55.00
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Bradley Ruppert**

Mailing Address 209 N. Lark Lane

City	State	Zip Code
Carbondale	IL	62901

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2015

**Transaction ID : SB30B.37775**

Amount of Each Disbursement this Period

1083.83
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1396.64
---------

--

	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

DEMOCRATIC PARTY OF ILLINOIS

8128.17

**SCHEDULE H2 (FEC Form 3X)****ALLOCATION RATIOS**

PAGE 27 OF 43

NAME OF COMMITTEE (In Full)  
DEMOCRATIC PARTY OF ILLINOIS**RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT  
ACTIVITIES APPEARING ON THIS REPORT.**

Methods of allocation:

- I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. **For PACs Only:** Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER 09-15-15 Fall Event (09/15/2015) ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported <b>Transaction ID : H2.37787</b>	FEDERAL % <div>36.00 %</div>	NONFEDERAL % <div>64.00 %</div>
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div></div>	NONFEDERAL % <div></div>
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div></div>	NONFEDERAL % <div></div>
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div></div>	NONFEDERAL % <div></div>
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div></div>	NONFEDERAL % <div></div>
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div></div>	NONFEDERAL % <div></div>

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 28 OF 43

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Sidney's Valet Service</b>		<b>Transaction ID : H4.37807</b>		Allocated Activity or Event:	
Mailing Address 725 N. Skokie Highway				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Lake Bluff		State IL	Zip Code 60044	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Parking				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: <b>Administrative</b>		Category/Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM]				<div> <div>0.00</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.80			3.20		5.00

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Chicago Carriage Club</b>		<b>Transaction ID : H4.37803</b>		Allocated Activity or Event:	
Mailing Address 2617 S. Wabash				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Chicago		State IL	Zip Code 60616	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Cab for event				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM]				<div> <div>0.00</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.60			6.40		10.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Uber</b>		<b>Transaction ID : H4.37805</b>		Allocated Activity or Event:	
Mailing Address 300 N. Elizabeth Drive				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Chicago		State IL	Zip Code 60607	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Cab				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM]				<div> <div>0.00</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.20			12.80		20.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 29 OF 43

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Panera Bread</b>		<b>Transaction ID : H4.37801</b>		Allocated Activity or Event:	
Mailing Address 940 Green Bay Road				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City Winnetka	State IL	Zip Code 60093		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: Holiday gifts				0.00	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date	
<b>[MEMO ITEM]</b>				M M / D D / Y Y Y Y Y Y 10 / 29 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.56			6.34		9.90

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Del's Popcorn Shop</b>		<b>Transaction ID : H4.37810</b>		Allocated Activity or Event:	
Mailing Address 3013 Lindbergh Boulevard				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City Springfield	State IL	Zip Code 62704		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: Food for election night				0.00	
Activity or Event Identifier: Administrative		Category/ Type		Date	
<b>[MEMO ITEM]</b>				M M / D D / Y Y Y Y Y Y 11 / 04 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.27			11.14		17.41

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Starbucks Coffee</b>		<b>Transaction ID : H4.37812</b>		Allocated Activity or Event:	
Mailing Address 2003 W. Monroe Street				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City Springfield	State IL	Zip Code 62704		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: Coffee for office				0.00	
Activity or Event Identifier: Administrative		Category/ Type		Date	
<b>[MEMO ITEM]</b>				M M / D D / Y Y Y Y Y Y 11 / 04 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.07			9.02		14.09

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 30 OF 43

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>O'Hare Airport Chicago</b>			<b>Transaction ID : H4.37799</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 10000 Bessie Coleman Drive								
City Chicago		State IL		Zip Code 60666				
Purpose of Disbursement: Meal for Florida meeting				Category/ Type		Allocated Activity or Event Year-To-Date 0.00		
Activity or Event Identifier: <b>Administrative</b> [MEMO ITEM]						Date 12 / 04 / 2014		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
3.16				5.62				8.78

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Hudson News</b>			<b>Transaction ID : H4.37809</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Lambert St. Louis Airport								
City St. Louis		State MO		Zip Code 63145				
Purpose of Disbursement: Food for meeting				Category/ Type		Allocated Activity or Event Year-To-Date 0.00		
Activity or Event Identifier: Administrative [MEMO ITEM]						Date 12 / 04 / 2014		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
2.19				3.90				6.09

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Barnes and Noble Booksellers</b>			<b>Transaction ID : H4.37768</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3111 S. Veterans								
City Springfield		State IL		Zip Code 62704				
Purpose of Disbursement: Books				Category/ Type		Allocated Activity or Event Year-To-Date 94374.86		
Activity or Event Identifier: Administrative [MEMO ITEM]						Date 02 / 14 / 2015		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
12.99				23.09				36.08

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 31 OF 43

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Sherwin Williams</b>		<b>Transaction ID : H4.37770</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3161 Hedley Road					
City Springfield	State IL	Zip Code 62704			
Purpose of Disbursement: Paint for bookshelves				Allocated Activity or Event Year-To-Date 94374.86	
Activity or Event Identifier: <b>Administrative</b> [MEMO ITEM]		Category/ Type		Date <input type="text" value="02"/> / <input type="text" value="14"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.24			51.99		81.23

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Quill Corporation</b>		<b>Transaction ID : H4.37755</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 37600					
City Philadelphia	State PA	Zip Code 19101			
Purpose of Disbursement: Office supplies				Allocated Activity or Event Year-To-Date 100982.11	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="03"/> / <input type="text" value="02"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
69.22			123.05		192.27

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Burnham Center</b>		<b>Transaction ID : H4.37756</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 111 West Washington					
City Chicago	State IL	Zip Code 60602			
Purpose of Disbursement: Rent				Allocated Activity or Event Year-To-Date 102826.40	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="03"/> / <input type="text" value="02"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
663.94			1180.35		1844.29

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
733.16		1303.40		2036.56

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 32 OF 43

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>TTI National</b>		<b>Transaction ID : H4.37758</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 96003					
City Charlotte	State NC	Zip Code 28296-0003			
Purpose of Disbursement: Telephone				Allocated Activity or Event Year-To-Date 102845.48	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date <input type="text" value="03"/> / <input type="text" value="02"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.87			12.21		19.08

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Stephanie Cullen</b>		<b>Transaction ID : H4.37759</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1832 N. 19th Street					
City Campaign Expenses	State IL	Zip Code 62702			
Purpose of Disbursement: Expense reimbursement-see breakdown				Allocated Activity or Event Year-To-Date 103217.25	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="03"/> / <input type="text" value="02"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
133.84			237.93		371.77

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Adobe Systems Incorporated</b>		<b>Transaction ID : H4.37761</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 75 Remittance Drive Suite 1025					
City Chicago	State IL	Zip Code 60675			
Purpose of Disbursement: Adobe Creative Cloud Membership				Allocated Activity or Event Year-To-Date 103217.25	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="03"/> / <input type="text" value="02"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
133.84			237.93		371.77

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
140.71		250.14		390.85

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 33 OF 43

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Powerplay Properties</b>		<b>Transaction ID : H4.37762</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1201 Veterans Parkway					
City Springfield	State IL	Zip Code 62707			
Purpose of Disbursement: Rent				Allocated Activity or Event Year-To-Date 103504.17	
Activity or Event Identifier: Administrative		Category/ Type		Date 03 / 02 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
103.29			183.63		286.92

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Kenny and Kenny, P.C.</b>		<b>Transaction ID : H4.37763</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1400 W. 47th Street					
City La Grange	State IL	Zip Code 60525			
Purpose of Disbursement: Bookkeeping				Allocated Activity or Event Year-To-Date 105212.92	
Activity or Event Identifier: Administrative		Category/ Type		Date 03 / 03 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
615.15			1093.60		1708.75

<b>C. Full Name (Last, First, Middle Initial)</b> <b>ADP</b>		<b>Transaction ID : H4.37778</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 842854					
City Boston	State MA	Zip Code 02284			
Purpose of Disbursement: Payroll processing fee				Allocated Activity or Event Year-To-Date 105289.48	
Activity or Event Identifier: Administrative		Category/ Type		Date 03 / 06 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
27.56			49.00		76.56

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
746.00		1326.23		2072.23

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 34 OF 43
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Culligan of Decatur</b>			<b>Transaction ID : H4.37764</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2767 N. Main Street								
City Decatur		State IL		Zip Code 62526				
Purpose of Disbursement: Water				Category/ Type		Allocated Activity or Event Year-To-Date 105310.75		
Activity or Event Identifier: Administrative						Date <input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2015"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
7.66				13.61				21.27

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Perkins Coie</b>			<b>Transaction ID : H4.37765</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 607 Fourteenth Street N.W.								
City Washington		State DC		Zip Code 20005				
Purpose of Disbursement: Attorney				Category/ Type		Allocated Activity or Event Year-To-Date 111768.75		
Activity or Event Identifier: Administrative						Date <input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2015"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
2324.88				4133.12				6458.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>AT &amp; T-P.O. Box 5080</b>			<b>Transaction ID : H4.37766</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 5080								
City Carol Stream		State IL		Zip Code 60197				
Purpose of Disbursement: Telephone				Category/ Type		Allocated Activity or Event Year-To-Date 112510.86		
Activity or Event Identifier: Administrative						Date <input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2015"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
267.16				474.95				742.11

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2599.70		4621.68		7221.38

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 35 OF 43

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Citi Cards</b>		<b>Transaction ID : H4.37767</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Processing Center P.O. Box 688901					
City Des Moines	State IA	Zip Code 50363			
Purpose of Disbursement: Expenses-see breakdown				Allocated Activity or Event Year-To-Date 112628.17	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date 03 / 12 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.23			75.08		117.31

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Emily Wurth</b>		<b>Transaction ID : H4.37773</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2267 Boysenberry Lane					
City Springfield	State IL	Zip Code 62711			
Purpose of Disbursement: Wages-Did not spend >25% on FEA				Allocated Activity or Event Year-To-Date 114099.39	
Activity or Event Identifier: Administrative		Category/ Type		Date 03 / 13 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
529.64			941.58		1471.22

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Emily Wurth</b>		<b>Transaction ID : H4.37774</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2267 Boysenberry Lane					
City Springfield	State IL	Zip Code 62711			
Purpose of Disbursement: Insurnace-Did not spend >25% on FEA				Allocated Activity or Event Year-To-Date 114712.57	
Activity or Event Identifier: Administrative		Category/ Type		Date 03 / 13 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
220.74			392.44		613.18

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
792.61		1409.10		2201.71

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 36 OF 43

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Internal Revenue Service</b>		<b>Transaction ID : H4.37782</b>		Allocated Activity or Event:	
Mailing Address Department of the Treasury				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City	State	Zip Code		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Kansas City	MO	64999		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Payroll withholding-Did not spend >25% on FEA				Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: <b>Administrative</b>			Category/ Type	<div> <div>03</div> <div>13</div> <div>2015</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
448.98			798.18		1247.16

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Illinois Department of Revenue</b>		<b>Transaction ID : H4.37783</b>		Allocated Activity or Event:	
Mailing Address Department of Revenue				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City	State	Zip Code		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Springfield	IL	62704		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Payroll withholding-Did not spend >25% on FEA				Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative			Category/ Type	<div> <div>03</div> <div>13</div> <div>2015</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55.13			98.00		153.13

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Illinois Department of Employment Security</b>		<b>Transaction ID : H4.37784</b>		Allocated Activity or Event:	
Mailing Address P.O. Box 19493				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City	State	Zip Code		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Springfield	IL	62703		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Payroll taxes-Did not spend >25% on FEA				Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative			Category/ Type	<div> <div>03</div> <div>13</div> <div>2015</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
95.86			170.43		266.29

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
599.97		1066.61		1666.58

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 37 OF 43

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>UPS</b>		<b>Transaction ID : H4.37788</b>		Allocated Activity or Event:	
Mailing Address Lockbox 577				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Carol Stream		State IL	Zip Code 60132-0577	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Shipping				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Allocated Activity or Event Year-To-Date	
				<div> <div>03</div> <div>17</div> <div>2015</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.91			42.50		66.41

<b>B. Full Name (Last, First, Middle Initial)</b> <b>ATT-Carol Stream</b>		<b>Transaction ID : H4.37789</b>		Allocated Activity or Event:	
Mailing Address P.O. Box 5080				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Carol Stream		State IL	Zip Code 60197	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Telephone				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date	
				<div> <div>03</div> <div>17</div> <div>2015</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
101.15			179.83		280.98

<b>C. Full Name (Last, First, Middle Initial)</b> <b>ATT-P.O. Box 5014</b>		<b>Transaction ID : H4.37790</b>		Allocated Activity or Event:	
Mailing Address P.O. Box 5014				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Carol Stream		State IL	Zip Code 60197-5014	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Telephone				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date	
				<div> <div>03</div> <div>17</div> <div>2015</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.20			28.80		45.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
141.26		251.13		392.39

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 38 OF 43

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Tim Mapes</b>		<b>Transaction ID : H4.37798</b>		Allocated Activity or Event:	
Mailing Address 632 Old Tippercanoe				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Springfield		State IL	Zip Code 62707	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Reimbursement for expenses seet memo entries				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Allocated Activity or Event Year-To-Date	
				116862.81	
				Date 03 / 20 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.86			58.41		91.27

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Comcast Cable</b>		<b>Transaction ID : H4.37814</b>		Allocated Activity or Event:	
Mailing Address P.O. Box 3001				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Southeastern		State PA	Zip Code 19398	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: TV and internet				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date	
				117036.26	
				Date 03 / 23 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
62.44			111.01		173.45

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Burnham Center</b>		<b>Transaction ID : H4.37815</b>		Allocated Activity or Event:	
Mailing Address 111 West Washington				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Chicago		State IL	Zip Code 60602	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Rent				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date	
				118883.63	
				Date 03 / 24 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
665.05			1182.32		1847.37

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
760.35		1351.74		2112.09

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE	39	OF	43
FOR LINE 21a OF FORM 3X			

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Culligan of Decatur</b>		<b>Transaction ID : H4.37816</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2767 N. Main Street					
City Decatur	State IL	Zip Code 62526			
Purpose of Disbursement: Water				Allocated Activity or Event Year-To-Date 119209.54	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date <input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
117.33			208.58		325.91

<b>B. Full Name (Last, First, Middle Initial)</b> <b>UPS</b>		<b>Transaction ID : H4.37817</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Lockbox 577					
City Carol Stream	State IL	Zip Code 60132-0577			
Purpose of Disbursement: Shipping				Allocated Activity or Event Year-To-Date 119235.42	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.32			16.56		25.88

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Sarah Nelson</b>		<b>Transaction ID : H4.37821</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 655 W. Irving Park Road Apt. 5015					
City Chicago	State IL	Zip Code 60613			
Purpose of Disbursement: Wages-Did not spend >25% on FEA				Allocated Activity or Event Year-To-Date 120697.17	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
526.23			935.52		1461.75

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
652.88		1160.66		1813.54

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 40 OF 43

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Emily Wurth</b>		<b>Transaction ID : H4.37823</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2267 Boysenberry Lane					
City Springfield	State IL	Zip Code 62711			
Purpose of Disbursement: Wages-Did not spend >25% on FEA				Allocated Activity or Event Year-To-Date 121912.79	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date MM / DD / YYYY 03 / 26 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
437.62			778.00		1215.62

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Kenny and Kenny, P.C.</b>		<b>Transaction ID : H4.37824</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1400 W. 47th Street					
City La Grange	State IL	Zip Code 60525			
Purpose of Disbursement: Bookkeeping				Allocated Activity or Event Year-To-Date 124530.29	
Activity or Event Identifier: Administrative		Category/ Type		Date MM / DD / YYYY 03 / 26 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
942.30			1675.20		2617.50

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Powerplay Properties</b>		<b>Transaction ID : H4.37825</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1201 Veterans Parkway					
City Springfield	State IL	Zip Code 62707			
Purpose of Disbursement: Rent				Allocated Activity or Event Year-To-Date 124817.21	
Activity or Event Identifier: Administrative		Category/ Type		Date MM / DD / YYYY 03 / 26 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
103.29			183.63		286.92

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1483.21		2636.83		4120.04

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 41 OF 43

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Internal Revenue Service</b>		<b>Transaction ID : H4.37830</b>		Allocated Activity or Event:	
Mailing Address Department of the Treasury				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City	State	Zip Code		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Kansas City	MO	64999		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Payroll withholding-Did not spend >25% on FEA				Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: <b>Administrative</b>			Category/ Type	<div> <div>126129.19</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
472.31			839.67		1311.98

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Illinois Department of Revenue</b>		<b>Transaction ID : H4.37831</b>		Allocated Activity or Event:	
Mailing Address Department of Revenue				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City	State	Zip Code		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Springfield	IL	62704		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Payroll withholding-Did not spend >25% on FEA				Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative			Category/ Type	<div> <div>126263.85</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
48.48			86.18		134.66

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Illinois Department of Employment Security</b>		<b>Transaction ID : H4.37832</b>		Allocated Activity or Event:	
Mailing Address P.O. Box 19493				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City	State	Zip Code		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Springfield	IL	62703		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Payroll taxes-Did not spend >25% on FEA				Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative			Category/ Type	<div> <div>126485.80</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
79.90			142.05		221.95

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
600.69		1067.90		1668.59

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 42 OF 43

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>CWLP</b>		<b>Transaction ID : H4.37826</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 300 South Seventh Street				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Springfield	State IL	Zip Code 62757		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Utilities				Allocated Activity or Event Year-To-Date 126497.73	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date <input type="text" value="03"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.29			7.64		11.93

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Sheridan Chicago</b>		<b>Transaction ID : H4.37785</b>		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 301 E. North Water Street				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Chicago	State IL	Zip Code 60611		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Hall-event deposit 09-15-15				Allocated Activity or Event Year-To-Date 5000.00	
Activity or Event Identifier: 09-15-15 Fall Event(09/15/2015)		Category/ Type		Date <input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1800.00			3200.00		5000.00

<b>C. Full Name (Last, First, Middle Initial)</b>				Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City	State	Zip Code		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement:				Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:		Category/ Type		Date <input type="text"/> / <input type="text"/> / <input type="text"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1804.29		3207.64		5011.93

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
11054.83		19653.06		30707.89

**SCHEDULE H6 (FEC Form 3X)**  
**DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS**  
**FOR ALLOCATED FEDERAL ELECTION ACTIVITY**  
(To be used by State, District and Local Party Committees Only)

PAGE 43 OF 43

FOR LINE 30a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) / Full Organization Name

US Postmaster-Springfield

Type of Allocated Activity or Event:

☐ Voter Registration ☐ GOTV  
☐ Voter ID ☒ Generic Campaign

Transaction ID : H6.37833

Mailing Address 2105 E. Cook Street

Allocated Activity or Event Year-To-Date

44.27

City Springfield State IL Zip Code 62701

Purpose of Disbursement  
PostageCategory/  
Type

Date 03 / 11 / 2015

FEDERAL SHARE

+

LEVIN SHARE

=

TOTAL AMOUNT

9.30

34.97

44.27

B. Full Name (Last, First, Middle Initial) / Full Organization Name

Type of Allocated Activity or Event:

☐ Voter Registration ☐ GOTV  
☐ Voter ID ☐ Generic Campaign

Mailing Address

Allocated Activity or Event Year-To-Date

City State Zip Code

Category/  
Type

Date / /

FEDERAL SHARE

+

LEVIN SHARE

=

TOTAL AMOUNT

C. Full Name (Last, First, Middle Initial) / Full Organization Name

Type of Allocated Activity or Event:

☐ Voter Registration ☐ GOTV  
☐ Voter ID ☐ Generic Campaign

Mailing Address

Allocated Activity or Event Year-To-Date

City State Zip Code

Category/  
Type

Date / /

FEDERAL SHARE

+

LEVIN SHARE

=

TOTAL AMOUNT

SUBTOTAL of Shared Federal and Levin Activity This Page

FEDERAL SHARE

+

LEVIN SHARE

=

TOTAL AMOUNT

9.30

34.97

44.27

TOTAL This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))

FEDERAL SHARE

9.30

LEVIN SHARE

34.97

TOTAL AMOUNT

44.27

TOTAL This Period for the Levin Share